



## Employment Application

It is our policy to provide equal employment opportunities to all qualified persons without regard to race, age, color, sex, religion, national origin, marital status, height, weight, veteran status, handicap or any other legally protected status.

Position Applied For	Date of Application
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Last Name	First Name	Middle Name
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Address	City	State, Zip Code
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Cell Phone #	Work Telephone #	Alternate Telephone #
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How did you hear about the firm?

- News Ad                       Employment Agency                       Web site \_\_\_\_\_  
 Current Employee \_\_\_\_\_                       Other \_\_\_\_\_

1. Date available for employment with Plunkett Cooney \_\_\_\_\_
2. What salary or rate of pay do you expect to receive if employed? \_\_\_\_\_ per \_\_\_\_\_
3. Have you applied for employment with the firm before? \_\_\_\_\_ If yes, when? \_\_\_\_\_
4. Do you have any relatives currently employed by Plunkett Cooney? \_\_\_\_\_  
If yes, please give that relatives name, relationship to you and position held:  
\_\_\_\_\_  
\_\_\_\_\_
5. Are you a citizen of the United States? \_\_\_\_\_ If not, do you have a work visa? \_\_\_\_\_  
Work Visa Number/Expiration Date: \_\_\_\_\_
6. Are you over the age of 18 years old? \_\_\_\_\_ If not, you may be required to provide authorization.
7. Have you ever been discharged or asked to resign from any position? If yes, explain:  
\_\_\_\_\_  
\_\_\_\_\_
8. Can you perform the duties of the job for which you have applied, with or without accommodation? \_\_\_\_\_  
If not, explain: \_\_\_\_\_  
\_\_\_\_\_

(If you have questions about the functions of the job, please ask the interviewer before answering this question).

# PLUNKETT COONEY

Education			
Type of School	School Name Location and/or GED Program Attended	Indicate Whether Degree was Received	Number of Credit Hours Completed
Have you received your high school diploma/GED Certificate? ( ) Yes ( ) No			
College/University (Undergraduate)			
College/University (Graduate/Law School)			

9. Do you possess a professional license, certificate or registration? \_\_\_\_\_  
 If yes, please complete the following:  
 Title/Type: \_\_\_\_\_ Number: \_\_\_\_\_ Issued by: \_\_\_\_\_  
 Date received: \_\_\_\_\_ Expiration date: \_\_\_\_\_

10. Please list academic honors, scholarships, offices held, etc. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (Do not list any of which reference religion, gender, national origin, age, disabilities or veteran status)

Employment History
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List your present position or most recent place of employment first (include full-time, part-time and volunteer work).  
 List every promotion as a new job. Use additional pages if necessary.

1. Employer: \_\_\_\_\_  
 o Address: \_\_\_\_\_  
 o Employment Dates (List month/date/year): From \_\_\_\_\_ To \_\_\_\_\_  
 o Your Job Title: \_\_\_\_\_ Number of hours per week: \_\_\_\_\_  
 o Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_  
 o Describe your duties:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 o Supervisor Name/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Can the firm contact as a reference. If not, please list alternate reference:  
 \_\_\_\_\_  
 Reason for Leaving and Explanation:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 o Name you were employed under if different from name shown on application \_\_\_\_\_  
 \_\_\_\_\_

2. Employer: \_\_\_\_\_  
 o Address: \_\_\_\_\_  
 o Employment Dates (List month/date/year): From \_\_\_\_\_ To \_\_\_\_\_  
 o Your Job Title: \_\_\_\_\_ Number of hours per week: \_\_\_\_\_  
 o Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_  
 o Describe your duties:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PLUNKETT  COONEY

- Supervisor Name / Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Can the firm contact as a reference. If not, please list alternate reference: \_\_\_\_\_

Reason for Leaving and Explanation:  
\_\_\_\_\_  
\_\_\_\_\_

- Name you were employed under if different from name shown on application \_\_\_\_\_

3. Employer: \_\_\_\_\_

- Address: \_\_\_\_\_
- Employment Dates (List month/date/year): From: \_\_\_\_\_ To \_\_\_\_\_
- Your Job Title: \_\_\_\_\_ Number of hours per week: \_\_\_\_\_
- Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_
- Describe your duties:  
\_\_\_\_\_  
\_\_\_\_\_

- Supervisor Name/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Can the firm contact as reference. If not, please list alternate reference: \_\_\_\_\_

Reason for Leaving and Explanation:  
\_\_\_\_\_  
\_\_\_\_\_

- Name you were employed under if different from name shown on application \_\_\_\_\_

4. Account for all periods of unemployment of 2 weeks duration or more since you left school until present time (use additional page(s) if necessary) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Are you currently or have you previously served in the U.S. Armed Forces? \_\_\_\_\_  
If yes, give rank and dates of service: \_\_\_\_\_  
If applicable, give status of discharge: \_\_\_\_\_

Professional References

➤ Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

➤ Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

➤ Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_



Please read carefully before signing.

I understand that by completing this application there is no guarantee of a job interview or a job offer. No promises regarding employment have been made to me and I understand that nothing in the employment application, in Plunkett Cooney's policies and procedures or personnel guidelines or in my communication with any Plunkett Cooney representative is intended to create a contract of employment between Plunkett Cooney and me. Additionally, I understand that if any employment relationship is established, I have a right to terminate my employment at any time. I also understand that Plunkett Cooney retains the right to terminate my employment at any time. Further, I understand that Plunkett Cooney has the right to modify its policies and procedures without giving me any notice of the change.

I hereby authorize Plunkett Cooney to verify all of the information I have provided on my application. I also agree to execute, as a condition of employment or continued employment, any additional written authorizations necessary for Plunkett Cooney to obtain access to any copies of records pertaining to this information. I expressly authorize Plunkett Cooney to contact any of my prior employers and release all of those prior employers and Plunkett Cooney from any and all liability arising from their giving information about my employment history.

State and federal law require Plunkett Cooney to make reasonable accommodation of handicap applicants and employees where the accommodation does not impose an undue hardship on Plunkett Cooney. Michigan law provides that employees and applicants may request an accommodation of their handicap by notifying Plunkett Cooney in writing of the need for accommodation within 182 days of the date that the individual knows or should know that an accommodation is needed.

I certify that I can and will upon request, substantiate all statements made by me on this application, and that such statements are true, complete and correct to the best of my knowledge. I understand that a false statement, false answer, misrepresentation or omission to any question will be sufficient ground for rejection of my application or my immediate discharge.

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Applicant Signature and Date

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